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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Scott A. Cluff et al.

Serial No.: 09/706,960

Filed: November 6, 2000

For: RECOVERING A SYSTEM THAT
HAS EXPERIENCED A FAULT

§ Group Art Unit: 2184

§
§
§ Examiner: Gabriel L. Chu

§
§
§ Atty. Dkt. No.: MCT.0133US

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NOV 28 2003

Technology Center 2100

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REPLY TO OFFICE ACTION DATED AUGUST 11, 2003

Dear Sir:

In response to the Office Action of August 11, 2003, please amend the above-identified application as follows:

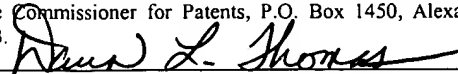
Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

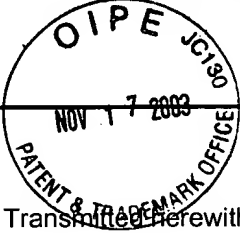

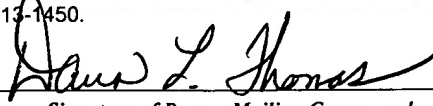
11/20/2003 EHAILE1 00000001 09706960

01 FC:1202

144.00 OP

Date of Deposit: 11-11-2003
I hereby certify under 37 CFR 1.8(a) that this correspondence is being deposited with the United States Postal Service as **first class mail** with sufficient postage on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313.

Dawn L. Thomas

2184\$

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. MCT.0133US	
Applicant(s): Scott A. Cluff et al.					
Serial No. 09/706,960	Filing Date 11/06/2000	Examiner Gabriel L. Chu		Group Art Unit 2184	
Invention: RECOVERING A SYSTEM THAT HAS EXPERIENCED A FAULT					
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			NOV 28 2003 Technology Center 2100		
TO THE COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	31 -	23 =	8 x	\$18.00	\$144.00
INDEP. CLAIMS	5 -	5 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$144.00
 <input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input checked="" type="checkbox"/> A check in the amount of \$144.00 to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-1504(mct.133) <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ Signature			Dated: Nov. 11, 2003		
Dan C. Hu Reg. No. 40,025 TROP, PRUNER & HU, P.C. 8554 Katy Freeway Suite 100 Houston, Texas 77024 CUSTOMER NO. 21906					
cc:			<div>I certify that this document and fee is being deposited on 11/11/2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div style="text-align: center;"> Signature of Person Mailing Correspondence</div> <div style="text-align: center;">Dawn L. Thomas Typed or Printed Name of Person Mailing Correspondence</div>		